



## **New Jersey Department of Children and Families Policy Manual**

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Issuance:	550	<b>Child on Child Sexual Abuse</b>	

### **Reports and Referrals Regarding Child-on-Child Sexual Abuse and Child-on-Child Sexual Activity**

**8-29-2011**

This policy serves to establish procedures for screening, investigating, and thoroughly assessing incidents of child-on-child sexual abuse and child-on-child sexual activity.

#### **Authority**

**8-29-2011**

In accordance with N.J.S.A. 9:6-8.18 and N.J.S.A. 30:4C-11, the Department of Children and Families, Division of Child Protection and Permanency, shall, upon receipt of such report, take action to assure the safety of the child under section 4 of P.L.1971, c. 437 (C. 9:6-8.11).

#### **Overview**

**8-29-2011**

The Department of Children and Families' Centralized Screening Operation, the State Central Registry, screens and accepts all reports and referrals of child-on-child sexual abuse and child-on-child sexual activity. Child Protective Services (CPS) reports are assigned to either the appropriate CP&P Local Office, IAIU Regional Office, or after-hours SPRU Worker for investigation. Reports of child-on-child sexual abuse are coded CPS.

Mandatory referrals are made to a designated Regional Diagnostic and Treatment Center for Child Abuse and Neglect (RDTC) on all children involved in a child-on-child sexual abuse allegation.

Referrals of child-on-child sexual activity are coded as a Child Welfare Services Assessment (record the Service Type as Child Services> emotional behavior) and assigned in locked status to the Local Office or SPRU Worker.

When sexual interactions occur between siblings or unrelated children, young children or adolescents, the parents/caregivers have the responsibility to see that these activities stop and that non-sexual behavior is maintained or resumed.

According to the NJ Office of Training and Professional Development, national data on juvenile sex offenders and sex crimes indicate juveniles commit between 15%-20% of all sexual offenses and up to 50% of all molestation. In addition, the average age of the juvenile offender is 14/15 years of age. Victims are related to or acquainted with the offender 75% of the time, and babysitting provides opportunity. Finally, one's race, gender, ethnic background or financial station cannot be used as a barometer in determining who will offend.

## **Definition of Terms**

**8-29-2011**

"Child Offender" is a child under the age of 18 years and in a caregiver role for the other child, who uses force, coercion, intimidation or manipulation to engage in sexual acts/activity with that child.

"Child Victim" is a child under the age of 18 years who was forced, coerced, intimidated or manipulated to engage in sexual acts/activity, whether willingly or unwillingly, with a child offender.

"Child Initiator" is a child who takes the lead in introducing or beginning the sexual acts/activity with the other child in child-on-child sexual activity. Note - In truly "mutual" child-on-child sexual activity referrals, there may not be a "child initiator."

"Child Participant" is a child who participates in a child-on-child sexual act/activity with another child.

## **Child-on-Child Sexual Abuse**

**8-29-2011**

Child-on-child sexual abuse allegations are coded as CPS Family, CPS IAIU, or CPS Other, and require face-to-face contact by the CP&P/SPRU Worker or IAIU Investigator, with all parties listed in the allegation. The Division shall initiate a mandatory referral to the designated Regional Diagnostic Treatment Center for Child Abuse and Neglect for assessment and services, for both the alleged child victim(s) and the child offender(s). Sexual abuse is defined in the following sub-section. Child-on-child sexual abuse is defined below.

## **Definition of Sexual Abuse**

**8-29-2011**

New Jersey Criminal Law Defines Sexual Abuse.

N.J.S.A. 9:6-8.84 defines "sexual abuse" as "contacts or actions between a child and a parent or caregiver for the purpose of sexual stimulation of either that person or another person. Sexual abuse includes:

- a. the employment, use, persuasion, inducement, enticement or coercion of any child to engage in, or assist any other person to engage in, any sexually explicit conduct or simulation of such conduct;
- b. sexual conduct including molestation, prostitution, other forms of sexual exploitation of children or incest; or
- c. sexual penetration and sexual contact as defined in N.J.S.A. 2C:14-1 and a prohibited sexual act as defined in N.J.S.A. 2C:24-4."

N.J.S.A. 2C:14-1c (criminal law) defines "sexual penetration" as "vaginal intercourse, cunnilingus, fellatio or anal intercourse between persons or insertion of the hand, finger or object into the anus or vagina either by the actor or upon the actor's instruction. The depth of insertion shall not be relevant as to the question of commission of the crime."

N.J.S.A. 2C:14-1d defines "sexual contact" as "an intentional touching by the victim or actor, either directly or through clothing, of the victim's or actor's intimate parts for the purpose of degrading or humiliating the victim or sexually arousing or sexually gratifying the actor. Sexual contact of the actor with himself must be in view of the victim whom the actor knows to be present. " N.J.S.A. 2C:14-1e defines "intimate parts" (used in the definition of "sexual contact") as the following body parts: "sexual organs, genital area, anal area, inner thigh, groin, buttock or breast of a person."

N.J.S.A. 2C:24-4 states: "prohibited sexual act means:

- a. sexual intercourse; or
- b. anal intercourse; or
- c. masturbation; or
- d. bestiality; or
- e. sadism; or
- f. masochism; or
- g. fellatio; or
- h. cunnilingus; or
- i. nudity, if depicted for the purpose of sexual stimulation or gratification of any person who may view such depiction."

Child-on-child sexual abuse is an occurrence of an act of sexual abuse between children. Child-on-child sexual abuse implies there is an existence of power differential and that one child is in a caregiver role. Through the use of manipulation, force, intimidation, or coercion, and for the purpose of exploitation, humiliation of the child victim, or sexual gratification of the child offender, the child offender is able to engage the child victim in sexual acts which can include but are not limited to:

- a. Fondling;
- b. Penetrative intercourse (oral, vaginal or genital) which could include the use of an instrument;
- c. Masturbation;
- d. Asking, forcing or inducing a child to engage in sexual play;
- e. Fellatio;
- f. Cunnilingus; or
- g. Nudity, if depicted for the purpose of sexual stimulation of any person who may view such depictions.

**Action Taken by SCR      8-29-2011**

The SCR Screener creates a Child Protective Service (CPS) Family, (CPS) IAIU, or (CPS) Other intake in NJ SPIRIT, printable as a Screening Summary, DCF Form [1-1](#). The SCR Screener codes the report, and designates an allegation(s) from the Allegation Based System. The SCR Screener then assigns the report to the appropriate CP&P Local Office, IAIU Regional Office, or the after-hours SPRU Worker for investigation. Four criteria must be met for CP&P to accept a report of child abuse and neglect. See [CP&P-II-A-2-200](#).

## Field Response

**8-29-2011**

The assigned Worker takes action, as necessary, to establish contact with both the alleged child offender(s) and child victim(s), and secures each child's immediate care, supervision, and safety. When investigating the alleged child offender(s), it is imperative to remember that he/she is a child and must be granted all the safety and protection as detailed by the law.

Determine whether the alleged child offender or child victim was him/herself a prior victim of sexual abuse or assault. Take action, as necessary. Parents/caregivers of the alleged child offender and the child victim are assessed for possible knowledge/involvement in the incident and their ability to protect the child from further harm.

Workers are obligated to report to the County Prosecutor all cases involving suspected criminal conduct on the part of a parent, caregiver, or any other person. See [CP&P-II-C-4-200](#). If a finding is substantiated in a child-on-child sexual abuse investigation, code as such and name the child offender as the perpetrator.

If, during the investigation, the parent or caregiver is found to have played a role in the incident, either through knowing of previous incident(s); or encouraging the act(s); or knowingly not protecting the children; or making inappropriate child care arrangements and child-on-child sexual abuse or child-on-child sexual activity occurred during his/her absence, the Worker conferences the case with his/her Supervisor and documents these findings in the Investigation Summary, DCF Form [2-1](#), in NJS. See [CP&P-II-B-1-1600](#)

## **Referral to RDTC**

**8-29-2011**

All child sexual abuse reports, including child-on-child sexual abuse, which fall into each of the following categories (from the CP&P Allegation Based System), must be referred by CP&P staff to the RDTC within one working day of SCR/CP&P case acceptance:

- Sexually transmitted disease [allegation #18], [CP&P-II-E-1-1600](#)
- Sexual penetration [allegation #19], [CP&P-II-E-1-1700](#)
- Sexual exploitation [allegation #20], [CP&P-II-E-1-1800](#)
- Sexual molestation [allegation #21], [CP&P-II-E-1-1900](#)
- Substantial risk of sexual injury [allegation #22], [CP&P-II-E-1-2000](#)

## **Action Taken by the Assigned Worker**

When a CPS report is assigned to a CP&P Local Office, the assigned Worker conducts a home visit to assure that there is a viable, safe plan for the alleged child offender and child victim(s). Mandatory referrals are made to a designated Regional Diagnostic and Treatment Center for Child Abuse and Neglect on all children involved in a child-on-child sexual abuse allegation for assessment and possible service delivery. See [CP&P-II-C-2-600](#).

## **Relevant NJS Windows and Forms**

**8-29-2011**

NJS forms:

- DCF Form 1-1, Screening Summary
- DCF Form 2-1, Investigation Summary

NJS windows:

- Person Management Window
- Maintain Case Window
- Medical Mental Health Window
- CP&P Form [11-10](#), Health Passport and Placement Assessment.
- Medical History Window
- Disability/Risk Factors Window